

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

09 JUL 17 AM 10:09
Office Use Only

1. NAME OF
COMMITTEE (in full)

USE FEC MAILING LABEL
OR TYPE OR PRINT ▼

Example: If typing, type
over the lines.

Craig for US Senate

PO Box 2271

ADDRESS (number and street) ▼



Check if different
than previously
reported. (ACC)

Eagle

ID

83616

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00115667

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)



ID



4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

(b) 12-Day PRE- Election Report for the:



April 15 Quarterly Report (Q1)



Primary (12P)



General (12G)



Runoff (12R)



July 15 Quarterly Report (Q2)



Convention (12C)



Special (12S)



October 15 Quarterly Report (Q3)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the
State of

M M M / D D D / Y Y Y Y Y Y



January 31 Year-End Report (YE)

(b) 30-Day Post- Election Report for the:



July 31 Mid-Year Report
(Non-election Year Only) (MY)



General (30G)



Runoff (30R)



Special (30S)



Termination Report (TER)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the
State of

M M M / D D D / Y Y Y Y Y Y

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

through

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kaye O'Riordan

Signature of Treasurer

Date

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)

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